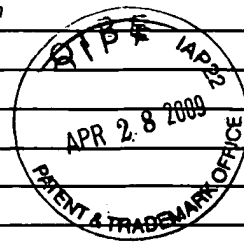


# FEE TRANSMITTAL

## for FY 2009

*Complete if Known*

Application Number	10/806,252
Filing Date	March 22, 2004
First Named Inventor	Mark R. Kirkland
Examiner Name	Viren A. Thakur
Art Unit	1794
Attorney Docket No.	1795.KIRK.PT



☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT	(\$) <b>110</b>
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**METHOD OF PAYMENT** (check all that apply)

☐ Check      ☒ Credit Card      ☐ Money Order      ☐ None      ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account      Deposit Account Number: 50-0881      Deposit Account Name: Morriss O'Bryant Compagni, PC

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below      ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17      ☒ Credit any overpayments

## FEE CALCULATION

## 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

	FILING FEES		SEARCH FEES		EXAMINATION FEES		
<u>Application Type</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fees Paid (\$)</u>
Utility	330	165	540	270	220	110	_____
Design	220	110	100	50	140	70	_____
Plant	220	110	330	165	170	85	_____
Reissue	330	165	540	270	650	325	_____
Provisional	220	110	0	0	0	0	_____

## 2. EXCESS CLAIM FEES

E. EXCESS CLAIM FEES		Small Entity
Fee Description	Fee (\$)	Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	52	26
Each independent claim over 3, or for Reissues, each independent claim more than in the original patent	220	110
Multiple Dependent claims	390	195

<u>Total Claims</u>		<u>Extra Claims</u>		<u>Fee (\$)</u>		<u>Fee Paid (\$)</u>		<u>Multiple Dependent Claims</u>
23		0						
	-26 or HP=		x		=			
							<u>Fee (\$)</u>	<u>Small Entity</u>

HP= highest number of totals claims paid for, if greater than 20

<u>Indep. Claims</u>		<u>Extra Claims</u>		<u>Fee (\$)</u>		<u>Fee Paid (\$)</u>
<u>4</u>	-3 or HP	<u>1</u>	x	<u>110</u>	=	<u>110</u>

HP= highest number of independent claims paid for, if greater than 3

### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35. U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s)

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
-100=	/50=	(round up to a whole number) x	=	


**4. OTHER FEE(S)**

Other: \_\_\_\_\_

Other: \_\_\_\_\_

**Fees Paid (\$)**

## SUBMITTED BY

Name (Print/Type)	Julie K. Morriss	Registration No.	33,263	Telephone	(801) 478-0071
Signature				Date	4-28-09